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**TRANSMITTAL
FORM**

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Total Number of Pages in This Submission

3

Application Number

10/696,266

Filing Date

10/29/2003

First Named Inventor

Benetti et al.

Art Unit

3738

Examiner Name

O' Connor, Cary E.

Attorney Docket Number

GUID-005DIV6

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	- Response To Restriction Requirement (2pgs.)
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	- Postcard
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	LAW OFFICE OF ALAN W. CANNON		
Signature			
Printed name	ALAN W. CANNON		
Date	1/26/05	Reg. No.	34,977

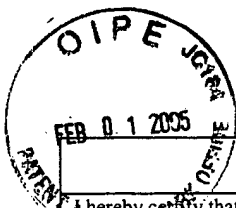
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Typed or printed name	MARIA J. SOUSA	Date	1/26/2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: **Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

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Date

1/26/2005

**RESPONSE TO RESTRICTION
REQUIREMENT**

Address to:
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P.O. Box 1450
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Attorney Docket
Confirmation No.

GUID-005DIV6
6516

First Named Inventor

Benetti et al.

Application Number

10/696,266

Filing Date

10/29/2003

Group Art Unit

3738

Examiner Name

O'Connor, Cary E.

Title

Surgical Instruments and
Procedures for Stabilizing the
Beating Heart During Coronary
Artery Bypass Graft Surgery

Sir:

This is in response to the Restriction Requirement dated January 4, 2005 for which a one-month period for response was given making this response due on or before February 4, 2005.

THE RESTRICTION REQUIREMENT

In the Official Action dated January 4, 2005, the Examiner required restriction to one of the following inventions that the Examiner identified:

Group I – Claims 23-38 and 47-60, drawn to a stabilizing device; and

Group II – Claims 39-46, drawn to a method of stabilizing a beating heart.

The Examiner required election of one of the above-listed inventions in order to be responsive to the Office Action.

RESPONSE

In response to the restriction requirement, Applicants elect Group I, claims 23-38 and 47-60, without traverse.


Conclusion

Applicants respectfully submit that a proper response has been made to the Restriction Requirement., and that all of the claims in this application are in condition for allowance, which action is requested. If the Examiner finds that a telephone conference would expedite the prosecution of this application, please telephone the undersigned at the number provided.

The Commissioner is hereby authorized to charge any underpayment of fees associated with this communication, including any necessary fees for extensions of time, or credit any overpayment to Deposit Account No. 50-2653, order number GUID-005DIV6.

Respectfully submitted,
LAW OFFICE OF ALAN W. CANNON

Date: 1/26/05

By: 
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